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DATE: October 21, 2005

PTO IDENTIFIER: Application Number 10/709,119-Conf. #3118

Patent Number

Inventor: Thomas R. Tudor et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: RADER, FISHMAN & GRAUER PLLC

Glenn E. Forbis

PHONE: (248) 594-0636

Attorney Dkt. #: 65833-0012

PAGES (Including Cover Sheet): 17

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Amendment in Response to Non-Final Office Action (12 pages)
Amendment Transmittal (1 page)
Charge \$560.00 to deposit account 18-0013
Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

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Application No. (if known): 10/709,119

Attorney Docket No.: 65833-0012

Certificate of Transmission under 37 CFR 1.8

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on October 21, 2005
Date

Diane R. Lytle
Signature

Diane R. Lytle

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Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Amendment in Response to Non-Final Office Action (12 pages)

Amendment Transmittal (1 page)

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OCT 21 2005

PTO/SB/17 (12-04v2)

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| | | | |
|---|--|--------------------------|------------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005 | | Complete if Known | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | 10/709,119-Conf. #3118 |
| | | Filing Date | April 14, 2004 |
| | | First Named Inventor | Thomas R. Tudor |
| | | Examiner Name | B. A. Lamb |
| | | Art Unit | 1734 |
| TOTAL AMOUNT OF PAYMENT (\$) 560.00 | | Attorney Docket No. | 65833-0012 |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|-----------|---------------|---------------------------|----------|---------------|
| 37 | - 35 = 2 | x 25.00 = | 50.00 | | | |
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | | |
| 2 | - 3 = | x | | | | |

3. APPLICATION SIZE FEE

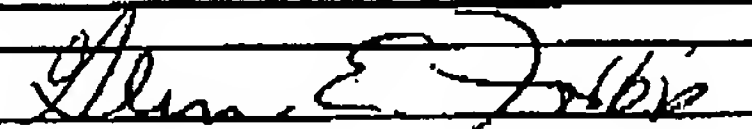
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

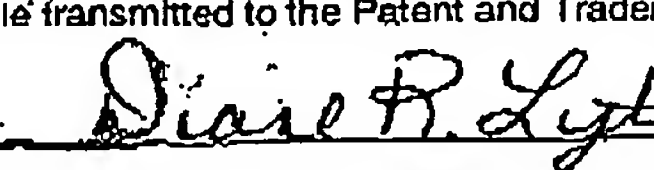
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|--------------------------------|---------------|
| | - 100 = | /50 | (round up to a whole number) x | |


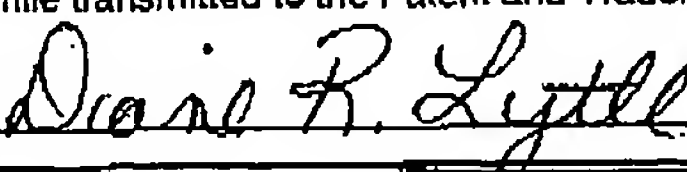
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount): _____

Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00

| | | | |
|---------------------|--|-----------------------------------|------------------|
| SUBMITTED BY | | | |
| Signature |  | Registration No. (Attorney/Agent) | 40,610 |
| Name (Print/Type) | Glenn E. Forbls | Telephone | (248) 594-0636 |
| | | Date | October 21, 2005 |

| | |
|---|--|
| Fee Transmittal | |
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| Dated: October 21, 2005 | Signature:  (Diane R. Lytle) |

| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 65833-0012 | |
|--|---|--|-----------------------------------|--------------------------------|---------------|
| Application No. 10/709,119-Conf. #3118 | Filing Date April 14, 2004 | Examiner B. A. Lamb | Art Unit 1734 | | |
| Applicant(s): Thomas R. Tudor et al. | | | | | |
| Invention: MULTIPLE ORIFICE APPLICATOR WITH IMPROVED SEALING | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 37 | - 35 = | 2 | x 25.00 | 50.00 |
| Independent Claims | 2 | - 3 = | | x | |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): Extension for response within third month | | | | | 510.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 560.00 |
| <input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity | | | | | |
| <input type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>18-0013</u> in the amount of \$ <u>560.00</u> . A duplicate copy of this sheet is enclosed. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-0013</u> as described below. A duplicate copy of this sheet is enclosed. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
|  Glenn E. Forbis Attorney Reg. No.: 40,610 | | | | Dated: <u>October 21, 2005</u> | |
| RADER, FISHMAN & GRAUER PLLC 39533 Woodward Avenue Suite 140 Bloomfield Hills, Michigan 48304 (248) 594-0636 | | | | | |
| Amendment Transmittal | | | | | |
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| Dated: October 21, 2005 | | Signature:  (Diane R. Lytle) | | | |